

THEY COMFORT ME

The History of Nursing in Belfast

by

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TWO duties are mine this morning, the first is a complete pleasure and it is to welcome the new class of students to this hospital. This is the traditional moment when you commence to walk the wards of a teaching hospital; when you meet patients for the first time; when some reality will distill from your dreams of what being a medical student was. It is fully understood that you have met patients earlier than to-day, nevertheless this is an important moment in your lives and the staff of this hospital have assembled to indicate their sincere desire that you succeed in learning from the patients, the staff and the daily work and discipline of this great institution. All those things are necessary to make you, quite simply, good doctors. A time will arrive, quite soon, when that title will be bestowed on you but the process of learning does not stop there. It is true the speed of learning may change but the process continues all through your working life and this is one of the rewards that a medical career offers you apart from the trust patients place in you.

My second duty is to deliver an address, called an oration on your programme, but this title should be taken to indicate the historical importance of the occasion, rather than the quality or form of what follows. This is no pleasure to me whatsoever but I ask you to bear with me for a little time. The title ("They Comfort Me") requires a word of explanation. Two years ago Dr James Elliott entitled his address, "Thy Rod and Thy Staff" and so I have dared to use the second part of that phrase in the Psalm, completely out of context with respect to its meaning, and apply it, of all things to nurses. What follows is the story of nursing in connection with the development of this institution.

The dependence of the patient on the nurse can be observed daily in any hospital and the medical staff in turn look to the nurse for the continuing care of their patients. I was quite young when one of my teachers told me to always "listen to what sister has to say" and this is at least one reason for the respect consultants in charge of wards can be seen to hold for the sisters they work with.

The origin of this hospital can be traced back to 1790 when a group of men, lay and medical, in this city aroused enough interest for the Belfast Charitable Dispensary to be opened. This was followed by the first hospital which was a rented house in Factory Row, in the area we now know as Smithfield. This took

*Mr. R. H. Livingston died in December 1980 before he had time to revise the text of his address for publication. In the circumstances the Editors have decided to publish it largely as it was delivered.

place in 1797 because of a typhus epidemic and one nurse was employed to tend the needs of the patients in six beds. This hospital ceased to function after several years because of lack of funds.

In 1815 the foundation stone was laid for the Belfast General Hospital in Frederick Street and the building was scarcely completed in 1817 when it was opened to patients on 1st August because of another fever epidemic in the city. It was designed for 100 beds but 212 patients were present at the peak of the epidemic. The site was on a common, bounded on one side by a few thatched cottages and on the other side at high tide its basement was almost washed by the sea which came over the large waste of grazing slope with ponds of water interspersed between it and the quay. The only public buildings near were the Old Poor House, Belfast Charitable Society and Saint Patrick's Church. A clear tract of land all around it allowed it to be ventilated by the sea air.

There is very little recorded about the nurses of that time in Belfast. It is certain they were considerably different from the present nurse and their duties involved preparation of their own and the patients food, the carrying of coal from the store to the wards, together with attending to the needs of patients who were confined to bed. They also had to wash the ward floors and the steps of the hospital. Uniform was not provided. Training for these people is not mentioned, so one assumes that the medical staff performed their dressings, applied their leeches, performed their cupping and blood letting themselves. Mention is made of workers in the laundry, so presumably the nurses did not have that task assigned to them but they did have to perform their own laundry. In charge of the nurses and laundry workers and any other female staff was a senior responsible female whose duties were as much housekeeping as being in charge of the nurses and she was eventually called Matron. In 1845 the total salary of the nursing staff amounted to £66. 14. 6d.

The hours of work were very long, meals were eaten on the job and a half day per week was the only time allowed when they could leave the buildings and then they were expected to go to Church for part of their free time. The pen picture of nurses in this era was sketched by Dickens and the Sairey Gamp and Betsy Prig characature of a gin drinking irresponsibility is the one that springs readily to mind. It would be totally unfair to let that picture be stored in your mind as the summary of nurses in that period, because there was one Anne Marshall who was admitted to the hospital as a patient and when she was recovering she made herself so useful in the wards that she was kept on. She was still with the hospital as Matron in 1849 at a time when the hospital was in dire financial difficulties to which she responded by donating all her life's savings of £61. 9. 10d. This act was recorded in the minutes of the Management Committee and it indicates a selfless dedication to the task of caring for the sick which perhaps set the standard for the School of Nursing which followed. A wall plaque to her memory can be seen in the hall of Bostock House.

Nurses and doctors work closely together and it is valuable to see the status and duties of the house surgeon as set out in a restatement of duties dated 1862.

He was regarded as having the chief authority in the hospital and was directly accountable to the Board of Management for its good government and for the morals and general conduct of the officers and servants. Medicine compounding and administration, together with the admission procedure and issuing of diet tickets were his responsibility. Charge of the wine and other stimulants and the surgical instruments and apparatus were his, together with the power of fining or dismissing any nurse or servant for neglect or impropriety of conduct. That is a shortened list, but it serves to show how much the status and duties of the house surgeon have been eroded over the years in favour of the nurse and perhaps it supports Mr Dickens' picture in the matter of wine and stimulants. Many of the nurses at this time could not read or write and local churches made provision on their Sunday half day to try and remedy this. This situation concerning nursing changed very little from 1817 until 1871. In that time additional accommodation had been built on to the Belfast General Hospital and some more nurses were employed but no training scheme, examination scheme or attempt to foster an esprit de corps existed.

In England and on the Continent of Europe a campaign for better nursing was afoot and this was initiated by Miss Florence Nightingale on her return from the Crimea in 1856. News of this eventually reached Belfast and public and medical opinion demanded an improvement in the nursing services. In 1870 at the Annual Meeting of the Governors of the hospital, the Hospital Board was requested to take such action as might be necessary. Some members of the Board visiting new training schools of nursing in England and King's College, London, and the Liverpool Training School were specially mentioned. In 1871 a report was issued which expressed the need for training for nurses as much as for medical men and suggested a separate institution for the purpose which should be managed by a general committee of 30 ladies and 30 gentlemen. The internal duties of the Home were to be under the immediate supervision of the ladies. This Home was to provide the nursing for the hospital and nurses for private nursing duties at patients' homes. A lady superintendent was recommended to be in charge of all the nurses and responsible to the Board of Management.

Probationers under training were to spend at least two months in a surgical ward, two months in a medical ward, then four months in a surgical ward, followed by four months in a medical ward, thus completing twelve months. "This training under the medical staff and officers of the hospital and an able superintendent form the keystone of the work and should command confidence. This is a matter of necessity, because, all who wish to nurse efficiently must learn to nurse in a hospital. The nurse when trained, should their normal conduct prove satisfactory, will obtain testimonials as duly qualified, renewable by actual examination from time to time. To the Ladies Committee will pertain the duty of inspecting all applicants, of inquiring into their eligibility and of recommending women from 25 to 35 years of age, able to read and write, as probationer nurses for a period of at least twelve months; who will be supported in the Home and receive fifteen pounds per annum wages for the first year, with a progressive rise of one pound for three years after".

Progress was made and Miss Merryweather, Lady Superintendent, the Training School, Liverpool, was invited to Belfast to give advice on the arrangements of the new Home, and the hospital offered a house free of rent for one year. A very special point agreed with the hospital was that the Lady Superintendent should have the entire control of the nurses in the hospital. Then an advertisement was inserted in the press offering a salary of £100 per annum for a Lady Superintendent. On 16th February, 1872, a general meeting was held in the Council Chamber of the Town Hall to meet Miss Merryweather and hear of the practical way of working in the Training School for nurses in Liverpool. She told the meeting that Liverpool had ten years experience of placing first two and then four Nightingale trained nurses in each ward as they were trained and two or three probationers were attached to each ward. She said many of her best nurses were Irish and while it was difficult to recruit the right sort of young women, much of her success was due to the operation of a superannuation fund.

The Board of Management of the Nurses Home and the Medical Staff of the hospital had several exchanges about the responsibility of the hospital Matron for some of the original hospital nurses and the Lady Superintendent of the Home having control of the nurses. They quickly agreed the following:

"That each medical man shall be consulted before any new nurse be appointed to his ward".

"The present staff of assistant nurses in the hospital was to be done away with and in future they were to be called household servants".

"The present Matron of the hospital or her successor to have charge of all the bedding and furniture of the hospital and to have full charge of all the household servants and to look after the provisions and to be held accountable for the cleanliness of the hospital".

"The Lady Superintendent not to interfere with the internal management of the hospital but should she object to any of the management to report the same to the Secretary of Staff, who will call a meeting of investigation".

"The Lady Superintendent not to make a remark on the treatment of any patient as the Staff are alone responsible. but at all times to see the orders of the Staff faithfully carried out".

"The regular staff nurses shall reside in the hospital".

This is how the Belfast Nurses Home and Training School came into being in 1872 and how the nursing of the Belfast General Hospital was put on a sure footing in line with the best in Great Britain. Of some personal interest to me is an item in the minutes 25th March 1872. "Gift of household linen from Messrs Richardson Son & Owden" the firm my father worked with all of his life. The following month one of their rivals in business, W. Quartus Ewart, provided a similar gift towards the furnishing of the Home. Miss Merryweather spent three weeks at the Home and on her recommendation Miss Persse was appointed the first Lady Superintendent. In November 1872 Dr John Moore and Professor Cumings were appointed by the Staff of the hospital to give systematic training to the probationers.

By 1873 the houses were too small for the Home and a new site was offered in Frederick Street and Mr John Lanyon was appointed architect to the Home and at the next meeting Sir Charles Lanyon reported on progress. In January 1874

a long letter from Miss Florence Nightingale was received by Miss Ottway and a few excerpts are of interest. "A good nurse must be a woman; a sick woman cannot be a healthy nurse. To induce a good and respectable young woman to your institution, to induce them to stay, to keep them in health, and above deterioration either of mind, souls or body, you must give them respectable and healthy accommodation, good food and the normal and physical helps necessary to keep woman up in hospital life, which, after all is said and done that man can say or do for the best, remains and always will remain, a great drain upon woman's life bodily and morale. Otherwise, women will keep themselves up as within remembrance of us all they have kept themselves up, by drink, by pilfering among the patients, and by the excitement of immoral behaviour. To draw a class into the nursing career who are above these things and to keep them above the very temptation to these things must be the very first object of all who wish to improve hospital and nursing generally". Much more follows, together with a plea for separate bedrooms, sitting rooms and good sanitation and finally; "Don't throw good money after bad, build new, if you build, build wisely . . .". "I wish the Belfast Nursing Institution God-Speed with all my heart and soul and I would like to see it outstrip all its contemporaries, that they may in their own turn outstrip Belfast".

The Hospital Board minuted its approval of the new nursing of the hospital and the Hospital Medical Staff repeatedly remarked on the improved standard of nursing. At the time when the Belfast Nurses Home was established 120 medical students were attending the Belfast General Hospital and 14 nurses supplied the needs of the hospital. About this time "Regulations as to the training of probationer nurses" was printed presumably as a brochure for aspiring candidates. The age was as stated above and the need for testimonials of character according to the forms supplied.

"They will be supplied with board (including tea and sugar), lodging and washing".

"The wages of a probationer during her year of probation will be £14.14 of which a proportion may be retained till the end of the period as a guarantee of good behaviour and subject to forfeiture in case of misconduct".

"It is expected that at the end of a year they will be fitted for nurses and their engagement will require them to serve two years more in hospital, district or private nursing".

"The duties of the nurses will be to attend the sick both rich and poor".

"All nurses and probationers will be provided with a sufficient allowance of beer or porter, to take at meal times, but they will not be allowed to procure or ask for wine or spirits without the express recommendation of a medical man".

In 1874 The Society for Providing Nurses for the Sick Poor was instituted and in the first annual report in 1875 it was noted that

"The general ignorance and neglect amongst the poor of the commonest sanitary matters".

"How often the doctors' instructions fail to be carried out from want of knowledge".

"Restoration of health is frequently prevented by inability to procure or cook suitable nourishment".

The Society sought the best methods of providing experienced nurses who would minister to the sick in their houses and teach the principles of sick nursing. Arrangements were made with the Nurses Home to provide nurses for districts in the City. The total cost of one nurse was £100, of which £41 was salary and

the balance the cost of her up-keep in the Home. Thus district nursing services commenced in Belfast. Despite the small salaries received by nurses, in 1875 a notice in the News Letter records that "Yesterday the nurses employed at the Belfast Royal Hospital presented Dr. Whitla, late senior house surgeon, with a gold Albert Chain, accompanied by an illuminated address, as a mark of their respect on the occasion of his leaving the Institution".

In this year the Royal Charter was bestowed on the hospital and in October a newspaper article announced that the new building for the Nurses Home and Training School would be ready on time in February 1876 and that liberal gifts had been received from all over Ulster. It referred to; "The anxiety on the part of families suffering from illness to avail themselves of the carefully trained, intelligent kindly nurses attached to the establishment". Later in a recruiting fervour it continues; "Who so powerful a fellow labourer with the wise physician? who so efficient an assistant to the skilful surgeon as a loving, tender, neat-handed, trained nurse? She is as necessary for the cure of disease as the doctor; nay the recovery from illness depends almost more upon the careful watchful nurse, than the prescriptions of the physicians. He sees the patient for a few minutes, she watches hour by hour through the long watches of the silver night". And later; "The establishment of the Training School for nurses presents the opportunity for pursuing a useful as well as profitable career for steady and intelligent women".

In 1875 Charles Folliott Fox RN was selected out of 28 candidates to be general superintendent of the hospital at a salary of £200 per annum with rations and residence. Perhaps this further erosion of the status of the house surgeon stimulated the idea but on receiving the Royal Charter the hospital rules were re-written or re-copied and it was re-stated that the house surgeon had the power to dismiss any nurse etc. This led to a flurry of published statements in the press between the Board of the Home, stating that this was the sole responsibility of the Lady Superintendent and individuals who defended the Hospital. Miss Ottway the Honorary Secretary of the Nurses Home resigned as a result and some sort of calm returned after conciliatory meetings had taken place between members of the two committees. No record of a change in the house surgeons' duties appeared however. In 1876 the second Lady Superintendent of the Home resigned and received a silver cake basket and salver which was put on public display in Neill's shop in High Street. In her place Miss Notcutt from St Thomas's Hospital was appointed and a strange sentence expressed the committees sense of the kindness of the house surgeon. In May of that year His Grace the Lord Lieutenant (the Duke of Abercorn) with Lord Claud John Hamilton, Sir Charles Lanyon and Lord Templeton not only visited the Belfast Royal Hospital, but also visited the new Nurses Home situated on the opposite side of the street to the hospital.

The years passed with growth in the hospital work and in 1878 the Nurses Home undertook the whole nursing of the hospital for £560. There were 14 staff nurses in the Home and 24 probationers in training and the Home had provided a Matron to Downpatrick and to Derry Hospitals. The first examination on completion of nurse training was introduced in 1890 and a uniform was enforced which was not popular at first. In 1877 the first mention was made that the lease

on the Frederick Street Hospital site would run out in 34 years time and that the City was closing in around the present site to such an extent that the question of a new site for rebuilding was discussed. In the years that followed the Countess of Shaftesbury, on the occasion of her son (the Earl of Shaftesbury) attaining his majority, presented the lease to the Hospital Board at a nominal rent for 10,000 years and specifically said the site could be sold to facilitate the move to a larger and more advantageous one. Later The Belfast City Council made a gift of the Old Asylum grounds for the purpose of accommodating the new Royal Victoria Hospital, which name was graciously consented to by Her Majesty Queen Victoria in 1897 at the time when £100,000 had been collected for the building fund. The tender of McLaughlin & Harvey Ltd was accepted in 1900 and they have been on and off the site ever since. The new hospital was opened in 1903.

Within the same span of years the nurses obviously increased their participation in patient care and one record of this appeared in the press when a nurse giving out the medicines to patients gave a measure of carbolic acid instead of black draught. The recipient complained it was not right and to prove her conviction she swallowed some herself, only to recognise her dreadful mistake. The patient died and the poor nurse was seriously ill for weeks. This responsible task is still entrusted to nurses but the control of drugs remains constantly under review and the ordering by medical staff and the execution by nursing staff is a very important point of liaison between both professions. The nursing hours remained long and a well wisher highlighted this condition in the press in 1895 only to be taken to task a few days later in a letter from a nurse, who gave answer on behalf of the profession, that nursing hours were not peculiar to the Royal Hospital but were a world-wide practice and that it was not consistent with thorough and scientific nursing to have any other arrangement.

The Hospital Management acted in a dual capacity to attend to the affairs of the Royal Belfast Hospital and of the developing Royal Victoria Hospital project. In 1901 they advertised for a lady matron for the Royal Victoria Hospital not less than 35 years of age and salary £80 per annum and eventually Miss M F Bostock, who had some years of experience in a similar position at the Throne Hospital, was appointed. The nursing staff moved to the Royal Victoria Hospital and was augmented by some additional appointments. Some probationers from the Nurses Home transferred to complete their training and by 1905 the last of these returned. Thus ended an epoch in the nursing story and a new school of nursing within the Royal Victoria was born. At the outset there were 62 nurses in all comprising, one night superintendent, eight sisters, 21 staff nurses and 32 probationers. The Night Superintendent's duties are interesting and included:

"To go anywhere and everywhere the nurses are employed and she is obliged to visit all wards frequently".

"The resident qualified officers shall have the right to visit their own wards and the wards of any other colleagues if required for any special professional purposes. at any time of the day or night".

"She shall when requested cause to be prepared and sent to the doctors' dining room a cup of tea or other light refreshment".

It was evident that a strict house discipline was practised and on Boxing Day a tea party in one ward caused nurses to leave some wards unattended and some left only in the care of a probationer. Matron assembled the staff and announced if she heard of a nurse leaving her ward without permission she would be summarily dismissed. While a "tight ship" was run, a sense of fun also seemed to be there and she passed a request by the Resident Medical Officers that the Nursing Staff be present at a dance in the Castle Restaurant. This obviously became a yearly function. Woe betide the nurse found asleep on duty or found guilty of theft and indeed, the practice of sending a probationer nurse to call resident pupils from their bedrooms to perform some duty in the Casualty Department was stopped because there was no check on the movements of the nurse. Consideration for her nurses was reflected in a request to management to provide porters to carry soiled dressings from the ward to the destructor. At the end of her term of office in 1922 the nursing staff had increased to 125 and she had kept the hospital staffed when large numbers of staff nurses were attracted into the Armed Forces Nursing Services during 1914-18 war, and injured troops from France were sent to Belfast via troop ships to Dublin and train to Belfast. The nursing hours were reduced to 56 per week in 1919 and the nurses wrote to the Nursing Committee saying they would prefer one day's leave per week rather than an eight hour shift system.

Miss Bostock had her training at Leeds General Infirmary but was connected with the Royal Victoria Hospital in some senior form for 34 years. Her standing amongst her colleagues was high and she was a member of the General Nursing Council for Ireland and the College of Nursing. This indicates that she was actively involved in the formation of the College of Nursing which was registered in 1916 and this focussed activity which led to the Nurses Act 1919 and under this Act the General Nursing Councils were set up for England and Wales, Scotland and Northern Ireland. These latter bodies became the Examining and Registration Bodies for Nurses and it is remarkable that this came about twenty or more years later than other countries, largely because of the Nightingale influence which was opposed to it when first suggested. Once established, however, developments came fast. The College of Nursing published a document in 1919 popularly known as the Nurses Charter which called for a 48 hour working week (when the maximum was 70), proper accommodation, systematic training, adequate salaries and a pension scheme.

The incoming Matron in 1922, Miss Annie E Musson, trained at Nottingham General Hospital and served as a nurse in the 1914-18 war before coming to Belfast. Much of her influence could be viewed as applying the Charter to the Royal Victoria Hospital. Early she arranged for probationer nurses to have instruction from the Sister Tutor daily between spells of work in the wards. Then new departments were formed in which nurses participated and the first seems to have been massage and electrical treatment followed by nurse radiographers, nurse electrocardiography technicians and nurse dieticians. The hospital work was extending rapidly as the population of the City increased and rioting taxed the accommodation and staff greatly as the new North of Ireland State established itself. The nursing staff grew in numbers and soon huts were erected to accommodate them.

In 1924 and 25 three additional wards were added to the hospital corridor and each existing ward was extended in length to their present size and an additional building for nurse accommodation was provided at the front of East and West wings and known as the Musgrave Wing. A note of special pleasure marked the completion of the nurses classroom in 1926 and medical students may be interested to know that for many years their predecessors attended bandaging classes conducted by the Nursing Tutor. At this time a staff nurse's salary was £45 and the Matron thought a better standard could be obtained if a salary of £60, rising to £65 were offered. She obviously was successful because two years later she requested that theatre staff nurses, at present getting £65 should get £70, because "this will give surgeons and patients a better service than a constant change of nurse".

The Student Nurses Association was formed in 1927 and a badge for nurses trained in this hospital was introduced in 1931 and the following year management was pressed to accept the Federated Superannuation Scheme for nurses. Following this a system of scholarships was introduced for gold and silver medalists in the nursing examinations to receive their midwifery training in the newly established Royal Maternity Hospital. An insight into a Matron's mind is given by her attitude to the 'no smoking' rule which she realised was frequently broken in the bedrooms. Because this was a dangerous practice, it was legalised in certain rooms but never allowed on duty. The new Nurses Home was built about 1935 to provide additional accommodation for nurses required for the Royal Maternity Hospital and the Musgrave Clinic. The new nurses classrooms were there and some Royal Victoria Hospital nurses were accommodated there from 1937 onwards. In 1950 it was named Musson House.

A preliminary training school (PTS) for probationers had only been a part-time affair until 1939, but then a case was made and a full-time PTS was introduced and eventually the £10 entrance fee paid by nurses was discontinued, but replaced by a £5 deposit for the PTS course which was repaid if success was achieved in the examination. The story becomes very much within personal memory from this period in time and Miss McFarland went to Manchester for a course in orthopaedic work in 1943 and she was a latter day Matron. One of the final acts of Miss Musson concerned the image of the Royal Victoria Hospital nurses and with the end of the war, despite coupons being required, nurses were to wear stockings again. "Nurses feet are stained and dirty and unpleasant and in my opinion are a disgrace to the hospital and the uniform". She had seen the hospital through two blitzes on Belfast and managed with many staff absent on war service. The nursing strength had risen to 191. Bridging three matrons' work in the 'Royal' and having been trained in the Nurses Home in Frederick Street was an outstanding night superintendent, Sister Dynes, MBE, or more familiarly to many present here as Diana. Dr Calwell, the present Archivist, is responsible for some verses:

Who walks about at night?
Whose step is far too light?
Who puts the pups to flight?
Diana.

Whom have we often heard
Chasing the early bird
Bedwards, without a word?
Diana.
Who like some olden Queen
With a forbidding mien
Says "Nurse what do they mean?"
Diana.
So may she long remain,
Some to praise, some to blame
Throughout the year, the same
Diana.

She was night sister for 44 years from 1909 to 1953 and many nurses and doctors benefited by having met her. She died in 1968.

In 1946 Miss Florence E Elliott was appointed as Matron; the first Royal Victoria Hospital trained nurse to do so. To her fell the task of adjusting to the changes brought about by the introduction of the National Health Service in 1948. The nursing and medical staff commenced to expand almost at once and a new look was given to the nurses who were required to wear white shoes and stockings and this change was supported by the statement; "It is believed that black shoes and stockings are more severe on the feet than any other colour". Along with this went a request for four weeks annual leave, instead of three and this was instituted on 1st January, 1947. She awarded the Matron's prize for second year ward work to one Doreen McCullough, who is the present Chief Nursing Officer of the Department of Health and Social Services N.I. and responsible for the "Report of the Joint Working Party on Nurse Staffing in Belfast". Arrangements were made to employ male nursing orderlies and for the training of male nurses, but the response to the latter was disappointing and has remained so in this hospital. The Students Nurses Association had its 21st birthday and its founder, Miss Musson, attended to cut the cake. Miss Elliott was the main force in forming the Royal Victoria Hospital League of Nurses in 1949 and Miss Musson was elected its first President. This body has done much to keep nurses in contact with the hospital and has contributed to staffing by encouraging ex-nurses to work again. With increasing numbers of nurses in training an additional tutor was appointed and in 1950 "The Beeches" in Hampton Park was acquired to house the PTS where 28 probationers were accommodated each time. This relieved the pressure on the Royal Victoria Hospital classrooms where study days and block study weeks for student nurses were being introduced. Short spells of experience at the Northern Ireland Fever Hospital and the Ophthalmic Hospital were integrated in the course.

Discipline was strict and in those days radium needles were in use and the care of these both in and out of the patient will stir memories of searches extending from the patient to the incinerator often with the ready assistance of Dr Leeman and his forerunner of the Geiger Counter. One nurse was seriously disciplined for failing to exercise due care. Various special departments began to

grow in the hospital and the first full-time theatre sister was appointed. The Fracture Clinic existed already but was followed by wards set aside for fracture cases only. Neurosurgery became established, Metabolic Medicine and Cardiology commenced to separate off from general medicine and outpatient attendances increased tremendously. Nursing and medical staff were stretched considerably as the demand for treatment multiplied and the tempo of work increased.

New accommodation for nurses was provided in 1950 when Bostock House was opened and shortly afterwards a new floor was put in the lofty outpatient hall to extend this department. Additional nursing staff was in constant demand and the competition for this scarce commodity caused friction between departments on occasions. Miss Elliott revealed a character which compelled the respect of the Medical Staff and the devotion of her nurses throughout this difficult period. Eventually a theatre block had to be built and thus another new nursing department evolved in 1965, together with its recovery ward. It is a source of pleasure to many when Miss Elliott, who now lives in Australia in retirement, pays us a visit, as she did this year. One phase from her speech at the Nurses Prizegiving, in reference to unrest in nursing circles over pay is memorable; "Always remember the patients, they cannot go on strike". With her retirement in 1966 the hospital fell into the hands of specialist orthopaedic nurses, first Miss Kathleen Robb and then by Miss McFarland in 1973 for a short period of office and strange to say the place did not fossilise in plaster of Paris. A time has now arrived when personalities are still in post and comments will be omitted. The Outpatient Building, together with the Respiratory Intensive Care Department, were built and staffed with nurses just in time to meet the onslaught of "The Troubles" which commenced in 1969. Following this the world became especially aware of the quality of Royal Victoria Hospital nurses and their humanity, skill in ward, theatre and casualty department, their unselfishness with regard to time, energy and personal safety and their adaptability. The efforts of those who taught and inspired them must have had something to do with this.

In 1973 reorganisation of the Health and Social Services arrived on the scene following the Salmon report which re-arranged the nursing hierarchy from the rank of ward sister upwards and the Briggs report which cleverly assessed nursing needs for the Integrated Health Service. These events all affected the Royal Victoria Hospital. First Miss Robb was translated upwards and out of the hospital and the post of matron ceased to exist. A new Salmon type post was eventually filled by Miss Heather Barratt. She will realise by now that those trained outside Northern Ireland have played important roles in the developing of nursing here and have been much loved and respected and I think she knows that in her case not only the new person but the new system was being assessed. The post of matron of the past was demolished because she exercised autocratic hierarchy and did not share responsibility with assistants and deputies. The new system aims at providing tiers of promotion above the rank of Sister associated with levels of management responsibility. Secondly the Royal Victoria Hospital School of Nursing ceased to exist and was replaced by the Belfast Northern Group School of Nursing, which in many ways represents a reversion to the Belfast Nurses Home structure with its independent board and finance and aim to provide nurses

for all walks of life. Nurses in future will not be trained solely with the hospital needs in mind but district nursing, health visiting, mental and maternity nursing, to name but some, will be included in the courses. To achieve this, more time on courses of instruction and less time spent on the wards has had an effect on staffing levels, together with the loss of staff nurses at a very early stage to one of these non-hospital fields of work. While student nurses spend less time on the ward, trained staff nurses become increasingly necessary on a purely numerical consideration, never to mention the increasing complexity of medicine and nursing. The average period of work given by nurses to this hospital after registration is 26 weeks and this appears to be far too short for the good of the hospital needs and for the good of the staff nurses. The General Medical Council has applied a one year period of special supervised work in hospital before fully registering the newly qualified doctor after a much longer course and it is doubtful if the nurse is any different on obtaining her "fall". The Royal College of Nursing has wielded influence causing change in the past and it is hoped they will act in this matter. Many believe that management posts have been created and management training multiplied at a time when there is a great scarcity of nurses at the bedside. The stated aim was to increase the quality of care but as a biased observer, well established in the hospital scene, it appears that quality of care has only been maintained by greatly increased effort on the part of those nursing in the wards. In contrast the advantages of losing nurses to the districts is not yet evident; it is more difficult to get a geriatric patient home than five years ago; the outpatient attendances for dressings have not reduced, to name but two examples.

Nursing is a profession with carefully guarded ethical standards and it provides rewards in job satisfaction and a knowledge of contributing a service. It seems unfair that similar entrance requirements in the banking field are rewarded immediately with a salary which a nurse only attains after three years training, never to mention residential requirements and unsocial hours of work. Medical staff believe that the pay of nurses should be appropriate to the training and responsibility they carry and that their accommodation should be so good as to compensate for the necessary residence and unsocial hours. We also appreciate the privilege practised in this hospital of being involved in nursing appointments, but believe it should be a right. The nursing and the medical professions must actively foster co-operation in the affairs of each for the ultimate benefit of the patient. Let us both stand firm in the practice of training our students in a hospital. In 1821 Graves introduced bedside teaching in the Meath Hospital, Dublin and Sir Philip Crampton followed in surgical teaching in 1834. This practice soon became the Hall Mark of British medical training. Miss Florence Nightingale adopted the same principle for nurse training. Let us resist the call of educationalists towards a purely academic course and those who say; "Going round wards is not the ideal way to produce doctors". In an institution like this our senior nurse should be in full control of the hospital nursing with only the requirement to report to district level.

Recently the health budget was cut at a time when several areas of this hospital were not functioning because of shortages of nursing personnel. Funds were available for these nurses as they were found, but this is no longer the case. The

demand of patient need has not decreased and it is hoped that these areas will soon be fully staffed. Irrespective of criticism of the present nursing structure, the nursing staff of this hospital are outstanding and it was because of this I chose to arouse your interest in them and their problems. They must always be treated with respect and supported because we cannot do our work without them, but far beyond that is the friendship, support and encouragement they give us, their medical colleagues. In closing I wish you great success in the clinical part of your course and commend to you our sister profession, some of whom will be learners with you, while others have a lot to teach you.